

**Application Data Sheet**  
**Application Information**

**Application number::**

**Filing Date::**

**Application Type::** Regular

**Subject Matter::** Utility

**Suggested classification::**

**Suggested Group Art Unit::**

**CD-ROM or CD-R?::** None

**Number of CD disks::**

**Number of copies of CDs::**

**Sequence submission?::** Paper

**Computer Readable Form (CRF)?::**

**Number of copies of CFR::**

**Title::** Method for Common Management Model For  
Distributed Server Network

**Attorney Docket Number::** BEAS-1260US3

**Request for Early Publication?::** No

**Request for Non-Publication?::** No

**Suggested Drawing Figure::** 1

**Total Drawing Sheets::** 4

**Small Entity?::** No

**Latin name::**

**Variety denomination name::**

**Petition included?::**

**Petition Type::**

**Licensed US Govt. Agency::** No

**Contract or Grant Numbers::**

**Secrecy Order in Parent Appl.?:** No

### **Applicant Information**

**Applicant Authority Type::** Full Capacity

**Primary Citizenship Country::** US

**Status::** Inventor

**Given Name::** Franklin

**Middle Name::** Fulton

**Family Name::** Simpson

**Name Suffix::**

**City of Residence::** New Ipswich

**State or Province of Residence::** NH

**Country of Residence::** US

**Street of mailing address::** 20 Old Country Road

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**State or Province of mailing address::** NH

**Country of mailing address::** US

**Postal or Zip Code of mailing address::** 03071

### **Correspondence Information**

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## Representative Information

**Representative Customer Number::** 23910

## Domestic Priority Information

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	An application claiming the benefit under 35 USC 119(e) Provisional	60/462,920	04/15/03

## Foreign Priority Information

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

## Assignee Information

**Assignee Name::** BEA Systems, Inc.  
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**City of mailing address::** San Jose  
**State or Province of mailing address::** CA  
**Country of mailing address::** US  
**Postal or Zip Code of mailing address::** 95131